



Summer 2003

**AADE VA and DoD SPG
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Diabetes VA & DoD SPG Newsletter

VA and DoD Diabetes Educator's Specialty Practice Group (SPG)



ALLHAT Study Results

Recent important study results have been published on Hypertension that affects many of our patients with diabetes. In fact many patients with diabetes were included in this study.

The Antihypertensive and Lipid-Lowering Treatment to Prevent Heart Attack Trial (ALLHAT) was a practice-based clinical trial sponsored by the National Heart, Lung, and Blood Institute (NHLBI). The trial was conducted in approximately 600 office-based practices and general medical and specialty clinics throughout the U.S.A., Puerto Rico, the Virgin Islands, and in Canada.

A total of 42,418 patients were enrolled between February 14, 1994 and January 31, 1998, a large percentage of whom are African-American. A vanguard phase was conducted in the first half of 1994; the full-scale trial began in the fall of 1994 and continued for eight years, until March 31, 2002. The study results indicated:

Antihypertensive Trial 42,418 participants

- Because of the superiority of thiazide-type diuretics in preventing one or more major forms of cardiovascular disease and their lower cost, they should be the drugs of choice for first-step antihypertensive therapy.

- For the patient who cannot take a diuretic (which should be an unusual circumstance), calcium channel blockers

and ACE inhibitors may be considered.

- Most hypertensive patients require more than one drug. Diuretics should generally be part of the antihypertensive regimen. Lifestyle advice should also be provided.

Lipid Trial – 10,355 participants

- ALLHAT pravastatin and usual care groups both attained substantial cholesterol reductions, resulting in a relatively modest cholesterol difference between them.

- Accordingly, ALLHAT found only a small decrease in cardiovascular disease event rates (non-significant) for pravastatin compared with usual care and no difference in mortality.

- The study results do not alter current cholesterol treatment guidelines, which are based on a series of clinical trials with larger cholesterol reductions than that observed in ALLHAT. Thus, cholesterol lowering by lifestyle changes and drug treatment is recommended to reduce cardiovascular disease morbidity and mortality.

ALLHAT was the largest antihypertensive trial and the second largest lipid-lowering trial and included large numbers of patients over age 65, women, African-Americans, and patients with diabetes, treated largely in community practice settings.

For more information visit ALLHAT's website at : www.allhat.org



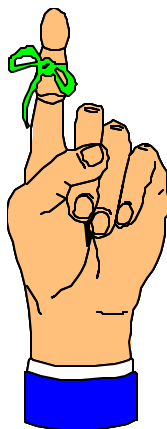
August 4 and 5, 2003

VA and DoD SPG 2 day meeting at the Sheraton City Centre Hotel in Salt Lake City, Utah. This year's theme is "Diabetes Care Coordination."

Register through EES, Bob DeGunia in Outlook at Bob.DeGunia@med.va.gov or by phone (314) 894-6543 for more information.

August 8, 2003

VA and DoD SPG business meeting from 5:30 - 7:00 pm. The meeting will be held in the Grand America, 1st level, Envoy Room. We will spend some of the SPG money to provide a light snack at the meeting.



Don't Be Late



This newsletter was produced by Cheryl Berman, CDE and Kathy Hobza, Media at the VA Nebraska-Western Iowa Health Care System, Omaha, NE.



***Learn,
Lead,
Succeed***

The AADE Leadership Forum 2003: Learn, Lead, Succeed was held in my hometown Chicago, Illinois April 25-26th.

The evening started with a motivational presentation "Changing Behavior- Our Patients and Ourselves," by Dr. William Polonsky. He reminded us there is diabetes related burnout in patients and providers. We sometimes need to re-evaluate how we approach our patients and ourselves.

The next day began with the history of AADE- an overview of the structure and functions of our national organization and an opportunity to meet the staff and leadership.

Presentations for the day included:

- How to Talk to the mass media- preparing, delivery techniques, being aware of traps and setting time limits
- Strategic Planning as a SPG leader- the nuts and bolts of successfully managing

chapter meetings, how to run an effective meeting, defining roles of leader and participants, and communicating with your members

- Budgeting Tips- forming a budget for expenses and reserves, accurate recording keeping

- Enticing New Members- what do we have to offer? Recognizing our accomplishments, spreading the word, communication with members

We wrapped up the final day with Chairs of the SPG's where opportunities to "share" with others, networking and future meetings took place. An official updated handbook was given to each Chair to use as a guideline for SPG's.

So much in such a short time! It was a great weekend of networking and skill building. Now on with the task at hand.

"Home-TeleHealth Technology Devices"

Management of patients with chronic conditions, ie, heart disease, diabetes, depression are being monitored over internet-based home telemonitoring systems such as Health Buddy device or Viterion 500 / 100 or other devices. These systems allow for an exchange of information easily by the patient, by answering questions which come up on the screen. Questions like what was your blood sugar this morning? What was your blood pressure this morning? Did you take your medications today? Did you check your feet today? This information is then transmitted via a telephone line to a secure web site where providers have immediate access to this health information and can follow-up with the patient if necessary. The Viterion 100 works similar to Health Buddy. In addition, Viterion 500 allows physiological parameters to be sent (blood

sugar, blood pressure, weights, pulse oximetry), allows patients to video conference from home with their clinicians and MOST important, Viterion and VISN 1 have worked together to integrate the data obtained from the patients home into CPRS.

Several facilities have reported significant reductions in inpatient admissions with diabetes, and reports of improved physical and mental status and substantial cost-savings. Health Buddy is currently being used in VISN 8 and Viterion in VISN 1. Hear more about this at the American Association of Diabetes Educators (AADE) National Annual meeting, August 6-10, and the VA and DoD Diabetes Educator's Specialty Practice Group meeting, August 4 & 5, 2003, in Salt Lake City.

Hope to see you in Salt Lake!